



TPL File – Field Value Change - **Correction**

In the last issue of Tidbits, DBHS had advised of changes to field values. Inadvertently, the value of 'X' was left out. 'X' will indicate an MMA drug plan while 'P' will designate pharmacy TPL other than Medicare.

The values for INS-TYPE are:

- B - Behavioral Health
- D - Dental
- M - Medical TPL
- P - Pharmacy TPL (not Medicare)
- S - Medicare Supplemental TPL
- V - Vision
- X - MMA Drug Plan
- Z - Medicare A & B

FYI - 'P' INS TYPE is used for a Pharmacy only policy, which is not part of the Medicare Drug Coverage.

Flex Fund Limit

T/RBHAs may access flex funds (\$9986 –Non-Medically Necessary Services) to purchase any of a variety of one-time or occasional goods and/or services needed for enrolled persons and their families, when the goods and/or services cannot be purchased by any other funding source. The service must be directly related to the enrolled person's service plan.

Flex funds are limited to \$1,525 per individual per fiscal year. However, there may be a situation when a RBHA needs to exceed the flex fund limit. When this occurs the RBHA must contact ADHS/DBHS to request approval. If approval is granted the RBHA must use the override code to bypass editing in CIS. On a monthly basis a report is generated and reviewed to determine if any client has flex fund services exceeding the \$1,525 limit. If the RBHA did not obtain approval to exceed the limit, the RBHA risks possible reversal of encounters exceeding the set limit.

Policy for Demographics

BHS is in the process of updating the Demographic Data Set User Guide. This review will include updating policy language. RBHAs will be advised when updated information is available.

All RBHAs have been provided with an initial "Intakes Without A Complete Demographic Report" and should be working to correct incomplete or missing demographic records.



Pended Encounter Updates

Z870 (Elapsed Days is Less Than Minimum for Refill)

The Z870 error code has been made soft by AHCCCS until further notice. The RBHAs are not required to take any actions on these pends for the May pend cycle. The RBHA Representatives will notify their appropriate contacts on any changes as necessary.

Monthly RBHA On-Site Encounter Work Group Meetings

Monthly, the Office of Program Support will conduct all RBHA Encounter Work Group Meetings on-site. A calendar was sent to each of the RBHAs with tentative dates and times for the Work Group Meetings.

OPS values the productive environment on-site visits provide, for this reason, meetings have been extended from one and a half to two hours. If RBHAs have any questions or need to reschedule a meeting please contact your assigned RBHA Representative.

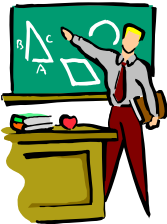
Coding Q & A



Many times, nurses call clients to check on side-effects, first-dose issues, how a client is doing with a med-change, etc., in lieu of having the client come into the clinic. Would this be a case management service since the service is provided over the telephone?



If the nurse engages the client via the telephone, the service would be encountered as case management (procedure code T1016). To encounter as T1002 (RN) or T1003 (LPN), the nurse would have to provide nursing services to the client in person.



Training

The Office of Program Support is offering training to the RBHAs for CIS pre-processor edits and AHCCCS pended encounter errors. The training instructs RBHA staff how to research claims/encounters using CIS and PMMIS. If interested, the RBHAs are encouraged to contact their RBHA Representative for more information. The RBHAs should also contact their RBHA Representative with suggestions for other training they would like offered.



NPI-National Provider Identifier

Effective May 23, 2007 all claims and encounters must be submitted with the NPI when applicable.

An electronic mailbox has been established for providers to forward a copy of their NPI notification via e-mail. The current AHCCCS provider ID number should be included in the e-mail for identification purposes. The e-mail address is nationalproviderid@azahcccs.gov

Providers may use the following website to determine if a NPI is required.
http://www.cms.hhs.gov/NationalProvIdentStand/06_implementation.asp.

Providers can obtain additional information about NPI at www.cms.hhs.gov/hipaa/hipaa2. This site contains Frequently Asked Questions and other information related to the NPI and other HIPAA standards.



!! Edit Alerts !!

An Edit alert is a faxed and e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure any system enhancements or changes are communicated to all program participants in an accurate and reliable manner. Edit alerts will be distributed when the information is first made available and again with the following monthly publication of the Tidbits.

New/Changed Edit Alert

Tracking Number: 48

Implemented: ☒

Reference Title: Provider Locator Code

Notification Date: May 24, 2006

Expected Implementation Date: May 5, 2006

ADHS will provide the RBHA's with 90 days notice when possible

Change Description: BHS has implemented a modification to CIS duplicate encounter pre-processor edit logic to exclude the Provider Locator Code from the check for a full duplicate. Encounters processed with the same Client ID, Procedure/Revenue Code, Dates of Service, Place of Service, Modifier, and 6-digit AHCCCS Provider ID will be edited as full duplicates.

Description:

BHS has implemented a modification to CIS duplicate encounter pre-processor edit logic. This change will exclude the Provider Locator Code from the check for a full duplicate. Encounters submitted with the same Client ID, Procedure/Revenue Code, Dates of Service, Place of Service, Modifier, and 6-digit AHCCCS Provider ID will fail full duplicate logic.

TPL Allowed Amount

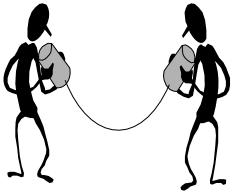
SSR 1013 promoted effective May 24, 2006. This SSR adds an edit to verify that the combined paid amounts, including net paid or special net value plus medicare, other insurance and co-pay, do not exceed the billed amount of the encounter.



User Access Request Forms

The Corporate Compliance Office must authorize all requests for access to CIS, Office of Human Rights, Office of Grievance and Appeals, Issue Resolution system, and PMMIS (AHCCCS) databases. In order to obtain access to any of these databases, please fax or mail a copy of the appropriate User Access Request Form and User Affirmation Statement to Stacy Mobbs at (602) 364-4736.

For questions or more information, please contact Stacy Mobbs by telephone at (602) 364-4708 or by e-mail at mobbss@azdhs.gov.



New OPS Phone Numbers

Rearrangement of workspace at DBHS has resulted in a few changes within the Office of Program Support. Effective

immediately, phone numbers have changed for the following Encounters and Data Validations Unit staff.

<u>Name</u>	<u>New Phone #</u>
Eunice Argusta T/RBHA Rep.-NARBHA Gila River, Navajo, Pascua Yaqui	(602) 364-4526
Kayla Caisse Data Validation Mgr.	(602) 364-4731
Michael Carter Supervisor- Encounters Unit	(602) 364-4732
Javier Higuera T/RBHA Rep.- ValueOptions, CPSA	(602) 364-4715
Janice Hippe Data Validation Rep.	(602) 364-4711



Who Do I Call??

If you need assistance please contact your assigned T/RBHA Representative

Gary Szymanski	Cenpatico 02&22	(602) 364-4677 szymang@azdhs.gov
Eunice Argusta	NARBHA Gila River Navajo Nation Pascua Yaqui	(602) 364-4526 arguste@azdhs.gov
Javier Higuera	ValueOptions CPSA 26&27	(602) 364-4715 higuerj@azdhs.gov